

AP12 Rec'd PCT/PTO 14 FEB 2008

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re applicant of

: Confirmation No. 8889

Kaoru YOKOTA et al.

: Attorney Docket No. 2006_1550A

Serial No. 10/594,060

: Group Art Unit 2876

Filed September 25, 2006

: Examiner Edwyn Labaze

TICKET MANAGEMENT SYSTEM, TERMINAL
DEVICE, TICKET MANAGEMENT SERVER,
REGISTER DEVICE, VALUE CONVERSION
METHOD, COMPUTER PROGRAM, AND
RECORDING MEDIUM

Mail Stop AMENDMENT

PATENT OFFICE FEE TRANSMITTAL FORM

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Attached hereto is a check in the amount of \$850.00 to cover Patent Office fees relating to filing the following attached papers:

Petition for Extension of Time \$120.00
Additional Claims Fee Transmittal Letter
Excess of Twenty \$100.00
Independent \$630.00

A duplicate copy of this paper is being submitted for use in the Accounting Division, Office of Finance.

The Commissioner is authorized to charge any deficiency or to credit any overpayment associated with this communication to Deposit Account No. 23-0975, with the EXCEPTION of deficiencies in fees for multiple dependent claims in new applications.

02/19/2008 LLANDGRA 00000041 10594060

02 FC:1615 100.00 OP
03 FC:1614 630.00 OP

Respectfully submitted,

Kaoru YOKOTA et al.

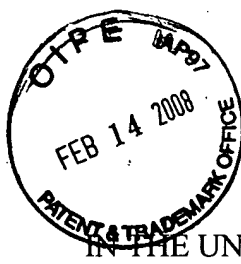
By Kevin McDermott

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February 14, 2008

[Check No. 8466de]

2006_1550A



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of : **Confirmation No. 8889**
Kaoru YOKOTA et al. : Attorney Docket No. 2006_1550A
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TICKET MANAGEMENT SYSTEM,
TERMINAL DEVICE, TICKET
MANAGEMENT SERVER, REGISTER
DEVICE, VALUE CONVERSION METHOD,
COMPUTER PROGRAM, AND
RECORDING MEDIUM : **Mail Stop: AMENDMENT**

ADDITIONAL CLAIMS FEE TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application. Additional fees required as a result of this Amendment are calculated as follows:

	SMALL ENTITY		LARGE ENTITY
Total Claims exceeding 20 (not already paid for): 2 x	(\$ 25 = \$)	or	(\$50 = \$100)
Indep. Claims exceeding 3 (not already paid for): 3 x	(\$105 = \$)	or	(\$210 = \$630)
<input type="checkbox"/> Multiple Dep. Claim(s) (if there previously were none): +	(\$185 = \$)	or	(\$370 = \$)
Total Additional Fee =	<u>\$</u>	or	<u>\$730.00</u>

☐ Small entity status of this application has been previously asserted.

☐ Small entity status of this application is established by the verified statement under 37 C.F.R. 1.9 and 1.27 which

☐ is enclosed or

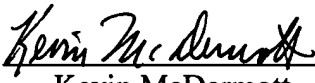
☐ has been previously submitted.

☒ A check in the amount of \$850.00 is enclosed, which includes the \$730.00 fee.

☐ Please charge Deposit Account No. 23-0975 the amount of \$ to cover additional fee. The Commissioner is authorized to charge any deficiency associated with this communication or to credit any overpayment to the Deposit Account. The original and two copies of this document are enclosed.

Respectfully submitted,

Kaoru YOKOTA et al.

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